

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	bag	413410	
O.I.P.E. CLASSIFIER	Y	57100	
FORMALITY REVIEW	Z	75333	7-7-00
RESPONSE FORMALITY REVIEW			

## INDEX OF CLAIMS

✓ ..... Rejected N ..... Non-elected  
 = ..... Allowed I ..... Interference  
 - (Through numeral)... Canceled A ..... Appeal  
 -+ ..... Restricted O ..... Objected

Claim	Final Original	Date
1	12/17/02	
2	6/20/03	
3	12/17/02	
4	6/20/03	
5	12/17/02	
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Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions  
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